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7590 09/24/2007

David L. Parker FULBRIGHT & JAWORSKI L.L.P 600 Congress Avenue, Suite 2400 Austin, TX 78701

THEREOF

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Monica	T. Owens A	(Depositor's name)
Mon	uer T. Owen	(Signature)
Dece	mber 18, 2007	(Date)
TOP	ATTORNEY DOCKET NO. CO.	MERINALTIONING

APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 10/731 554 12/09/2003 David H Walker D6152CIP2/D/D1 6350 TITLE OF INVENTION: HOMOLOGOUS 28-KILODALTON IMMUNODOMINANT PROTEIN GENES OF EHRLICHIA CANIS AND USES

APPLIN, LIFE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL PEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	12/24/2007
EXA	MINER	ART UNIT	CLASS-SUBCLASS			
BASKAR, P.	ADMAVATHI	1645	424-184100			
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53). CRR 1.53). Change of correspondence address (or Change of Correspondence Address from FTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form FTO/SB/12; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to		era 2	ht & Jaworski LL	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Research Development Foundation Carson City, Nevada Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🗎 Corporation or other private group entity 🚨 Government

4a, The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☑ Issue Fee A check is enclosed. 2 Publication Fee (No small entity discount permitted)

The Director is hereby authorized to charge the required (enclose an extra copy of this for overpayment, to Deposit Account Number 6-23-75 (enclose an extra copy of this for (enclose an extra copy of this form).

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5. Change in Entity Status (from status indicated above)

Advance Order - # of Copies

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2).

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